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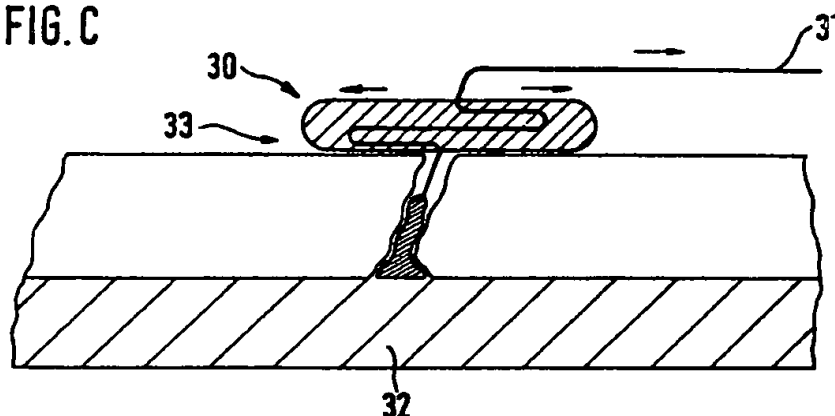
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Tension holder e.g. for vascular suture or plug device

The invention relates to a device with a mechanism to exert tension upon a string like element such as ure. The device has its major extension in the plane in which it is positioned and its minor extension along axis of tension exertion. Said tension mechanism may lateral or spiral displacement of the string like

element, wherein the tensile mechanism has elastic (springy) property, and said mechanism is not substantially extending above the upper surface of the device. This device is particularly used in association with a hemostatic plug to which a string is attached.

FIG. C



tion

und:

With the proliferative use of percutaneous vas-
interventions such as Percutaneous Transluminal
y Angioplasty (PTCA), angioplasty in other than
/ vessels (PTA), stenting, atherectomy, laser
ain other minimally invasive procedures in car-
angiology, cardiosurgery, radiology and surgery
as other disciplines, a need for percutaneous
devices of the operative entry site or vascular
site has been established.

In particular after percutaneous vascular pro-
cedure such as PTCA and PTA a method of nonsurgi-
cal closure with or without a suture of the puncture site
can be helpful in reducing bleeding complications,
reducing the time necessary to mechanically or manu-
ally compress the vascular access site until hemostasis
is achieved and reducing the time to patient discharge.
Closure devices may reduce hospitalization
time and may be helpful in performing catheter guided
procedures on an outpatient basis.

However there are still problems associated
with closure devices, which need to be addressed. Clo-
sure devices that use sutures applied by needles are
not always reliable and may need an additional means
of hemostasis such as a collagen or other plug on top of
the vascular puncture site or in the puncture channel.
A plug, however, carries the risk of getting dislodged
and embolizing into the circulation. This may be a
major risk if repeat procedures have to be carried
out through the same puncture channel within hours or a
days after the initial procedure. Therefore, closure
devices that employ plugs should be associated with a
mechanism to hold the plug in place. Also, often,
it is noted that sutures are being kept under tension for
some time to safely achieve hemostasis. Therefore,
closure devices featuring needles and sutures
as well as vascular closure devices employing puncture
need a mechanism to hold the suture under
tension and the plug safely in place in order to improve
the safety of the closure device. This applies to
closure devices used in other minimally invasive
procedures where (percutaneous) closure
may be of advantage. It is irrelevant for the use
of such tension holding device or plug securing
whether the plug is located totally or partially in
the vascular lumen or totally or partially in the puncture
percutaneous access site channel.

A major feature of such closure device and tension
holding device or plug securing device is, that such device
does not prohibit manual compression upon the puncture
site in case of failure of any of the closure

Some of the closure devices are of such a con-
struction, that no additional manual or any other
mechanical compression is possible, since the device is
extending significantly above the percutaneous access

site (puncture site) level. Mechanical compression would
critically damage the device and/or inflict trauma to the
patient. One solution may be the removal of the part of
the device that is extending significantly above the
access site level (usually the tension holding part of the
device). However, this carries among other risks e.g. the
risk of losing the plug into the circulation.

[0004] It has been found, that the present invention is
solving such shortcomings by describing a closure
device with a tension holding part that is not significantly
extending above the access site level and that permits
application of manual / other mechanical pressure with-
out the risk of reducing the safety and function of the
device and without the risk of traumatizing the access
site and its surrounding tissue (percutaneous puncture
site area)

Prior art:

[0005] The vascular puncture site sealing device using
a collagen plug commercially exploited under the trade
name VASOSEAL by Datascope Corp, USA; the com-
bined plug and intravascular anchor device, commercially
exploited under the trade name ANGIO-SEAL by Sher-
wood Davies & Geck, USA and the suture devices by
Perclose Inc, USA. (including Int application Nr WO
95/13021 and WO 94/13211)

Other prior art includes the device description by
Howard Taymor-Luria, USA (US patent 5415657) and by
Gene Myers (US patent 5486195); and the international
patent applications by David Hathaway et al (Int publica-
tion Nr WO 94/08516). These description deal with the
use of closure devices and do not describe a suture ten-
sion device and/or plug securing device. However, in
particular with use of the ANGIO SEAL device, a plug
securing and suture tension holding device that con-
forms to the practical needs is a necessity.

[0006] Any description of the present invention will
focus on vascular closure devices as they are primarily
used after vascular catheterization procedures, yet the
description is not limited to such uses; any other use
such as after endoscopic procedures, in gynecology,
gastroenterology are other operative or minimally inva-
sive procedures may also represent areas of use. "A"
always means also more than one.

Description of invention:

[0007] Once a collagen plug is placed within a punc-
ture site channel and associated (attached) with a string
(suture) or a plug or anchor is placed intravascularly
and is pulled against the puncture site hole from outside
via a string or suture or if a suture needs continued ten-
sion for a period of time in order to better achieve hemo-
stasis, a device that exerts continued traction upon such
string or suture connection is often needed.

[0008] Such tension device will stay in place for min-
utes, hours or days and will exert the tension while

g positioned at the skin level of the patient at or
 and the percutaneous access site (puncture site).
 device needs an atraumatic configuration that min-
 es trauma to the tissue it is resting/pushing on. This
 particularly important, since by virtue of the tension
 device is exerting the device will be pulled against
 tissue. Also, the device needs to be flat, so that
 hanical pressure (manual pressure) can be exerted
 (ed) on top of the device. So in the preferred config-
 ons of the device its diameter in the axis of exertion
 nsion (ie nearly perpendicular to the plane of the
 ace of the skin) is less than its diameter in the axis
 ie plane of the skin. In addition to the flat shape,
 d or oval type configuration help to adapt the device
 ie configurations of its respective positions, e.g. in
 groin. The side of the device facing the skin may be
 led for reduced trauma to the tissue and / or lined
 a special optimally skin/tissue compatible surface.

9] Another embodiment is a a open area of the
 ce, i.e. a central or eccentrically located hole or a slit
 are that accomodates the string or suture in such a
 that the string or suture can be easily threaded
 igh or into this opening. Once the suture or string
 nent) upon which the tension is to be exerted is in
 e, a fixation mechanism is activated in order to both
 y fix the element in its desired distance from the
 (one means to select the degree of tension) and
 ate the tension mechanism located inside the flat
 e.g. olive shaped device.

0] Commonly the device will be placed just at the
 level with one hand, while the other hand is main-
 ing slight tension on the string. Once the tension
 fixation mechanism is activated, the device is exert-
 ight tension and both hands can be released.

1] In one embodiment, the tension exerted by the
 ce - which is dependent on the initial tension of the
 g that had be held manually and the (elastic) prop-
 and the thickness of the tissue between the plug or
 suture - may be indicated by a simple gauge on the
 ide of the device.

2] The mechanism its self consists of a spring
 hanism that displaces the the string from its sraight
 se to the side (Bajonett ähnlich) or rolls or partially
 the string up until a tension limit inside the device.
 position of the device can be changed; the tension
 be determined by positioning (selecting the dis-
 e to the skin surface) or by selecting a certain
 ee of tension with the mechanism itself prior or
 placement of the device.

ms

Device with a mechanism to exert tension upon a
 string like element such as a suture, wherein the
 device has its major extension in the plane on which
 t is positioned and its minor extension along the the
 axis of tension exertion (blunt, flat configuration),
 said tension mechanism employing a primarily lat-

eral or spiral displacement of the string like ele-
 ment, wherein the tensile mechanism has elastic
 (springy) property, and said mechanism is not sub-
 stantially extending above the upper surface of the
 device, said tensile mechanism being active upon
 activation from a non tensile to a tensile (functional)
 state

2. Device of claim 1 wherein the device is flat oval
 shaped (flat egg)

3. Device of claim one wherein the device is of a disc
 like flat shape

4. Device of claim 1 wherein the device permits pres-
 sure application on top of it without unacceptable
 trauma to the underlying tissue

5. Device of claim 1, wherein the side of the device
 facing the tissue (or in contact with the tissue) is of
 soft material and/ or tissue compatible material

6. Device of claim 1 used in association with a hemo-
 static plug to which a string is attached

7. Device of claim 1, wherein the strength of the ten-
 sile mechanism can be preselected

8. Device of claim 1 wherein the actual degree of ten-
 sion is indicated by a gauge

9. Device of claim 1 wherein the tensile mechanism
 and fixation of the position of the device is activated
 at the same time

10. Device of claim 1, wherein activation of the tensile
 mechanism can be done by one hand

11. Device of claim 1, wherein the string to be extended
 is inserted into the device through a central hole of
 the device

12. Device of claim 1 wherein the string to be extended
 is inserted into the device through a slit like opening

13. Device of claim 1 wherein the string to be extended
 is leaving (exiting from the device) the device at
 least on one side through a central or nearly central
 hole or slit like hole

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FIG. A
Prior Art

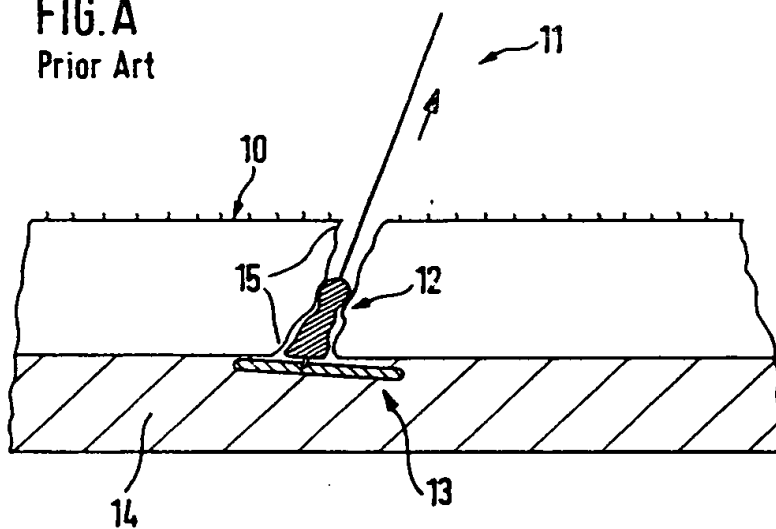


FIG. B
Prior Art

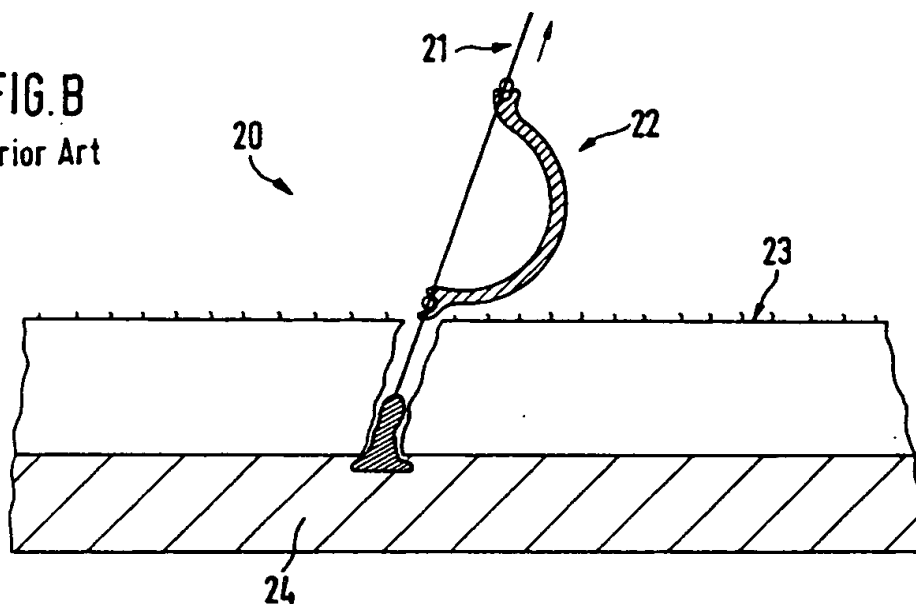


FIG. C

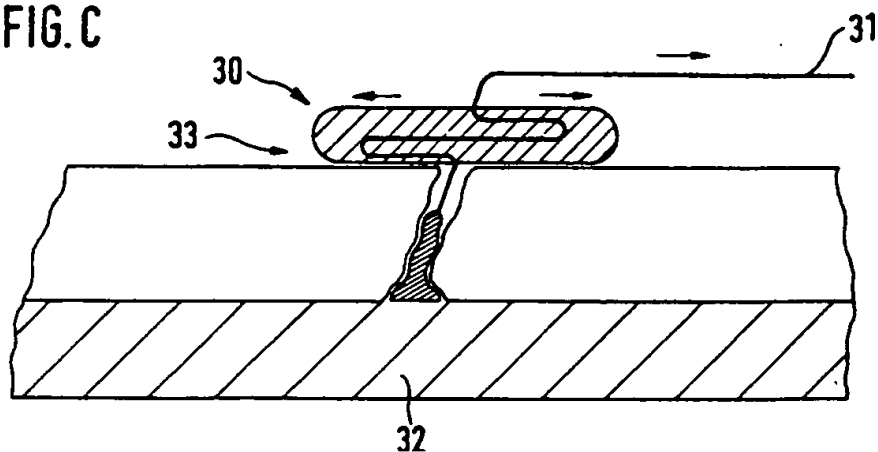


FIG. D

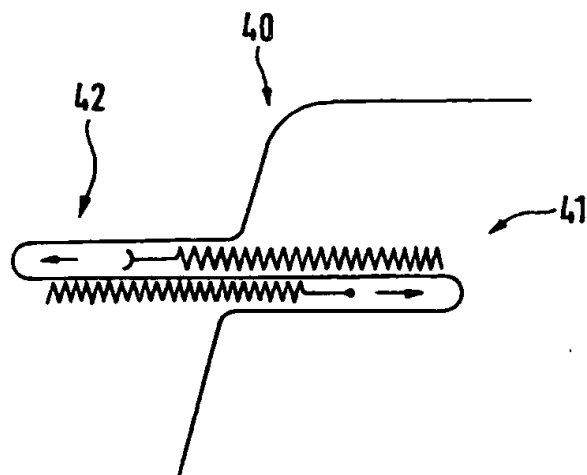


FIG. E₁

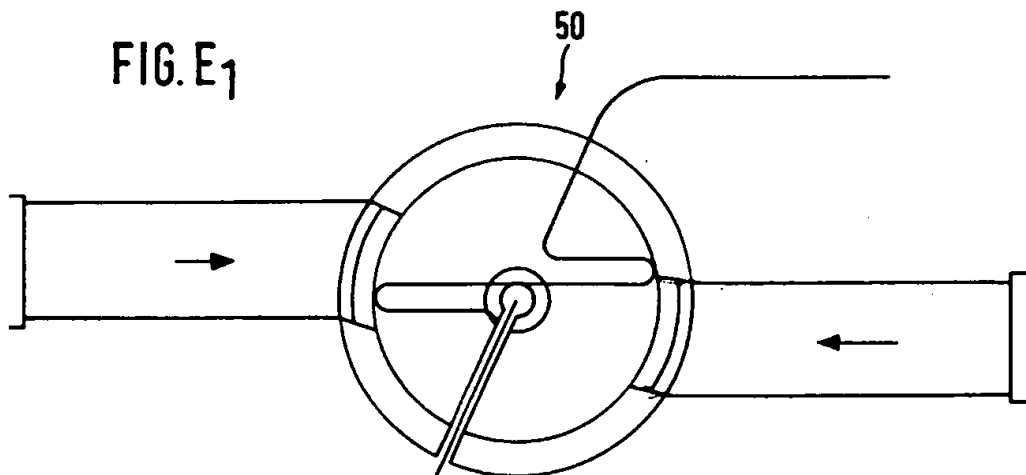
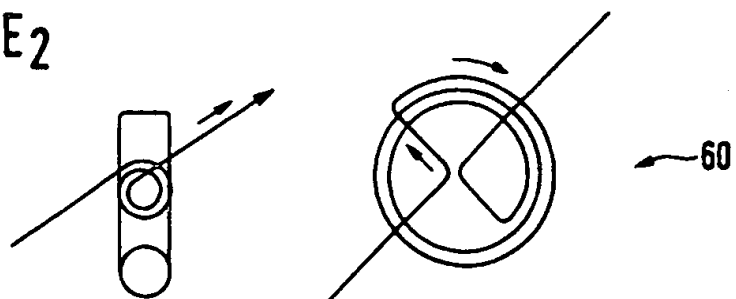


FIG. E₂





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EUROPEAN SEARCH REPORT

Application Number
EP 97 11 2968

DOCUMENTS CONSIDERED TO BE RELEVANT			
Category	Citation of document with indication, where appropriate, of relevant passages	Relevant to claim	CLASSIFICATION OF THE APPLICATION (Int.Cl.6)
X	US 4 950 283 A (DZUBOW LEONARD M ET AL) * column 2, line 25 - line 32 *	1	A61B17/00
A	US 5 411 520 A (NASH JOHN ET AL) * column 14, line 58 - line 65 *	1,6	
A	WO 89 11301 A (KENSEY NASH CORP) * page 9, line 5 - line 18 *	1	
A	US 3 650 274 A (EDWARDS LEON C ET AL)		
A	US 4 750 492 A (JACOBS RANDALL W)		
A	DE 19 58 429 A (J. GAECKEL)		
			TECHNICAL FIELDS SEARCHED (Int.Cl.6)
			A61B
The present search report has been drawn up for all claims			
Place of search THE HAGUE		Date of completion of the search 25 November 1997	Examiner Gérard, B
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